1. Page 1-2 Please confirm the due date of the submission; both November 17 and November 21 are stated as due dates in the RFP.

Answer: Due date for proposals is Nov. 17th at the time and place specified in the RFTOP

2. Page. 19_The RFTOP states: "The Contractor is expected to build on the success of the SHTP1 2004-2009 project and to the extent practical, utilize the existing project infrastructure, equipment, vehicles and office space." Could USAID provide an inventory stating the current condition of the equipment, etc. to assist the bidder in budgeting the items that do not need to be purchased?

Answer: The inventory list is attached as Attachment 1 in the form of an EXCEL spreadsheet. Equipment for the first six counties initiated in 2005/2006 may need to be replaced/ refurbished. However, equipment for the last six counties should be adequate under SHTP2 since these were purchased in 2008.

3. Page 20. The RFTOP states: "The successful Offeror will be required to ensure that the current implementing lead agencies are included as sub-contractors..." Does this preclude competitive bidding?

Answer: Competitive bidding is encouraged. However the Government of Southern Sudan has expressed its desire to see the current lead agencies continue with their work in the same locations in order to minimize possible disruptions. It is the responsibility of the offeror to explain how any handover from a current implementer to a proposed new subcontractor would occur and be managed with minimal program impacts.

4. P. 20-21 The RFTOP states: "Under the current SHTP 1, the lead agency partner NGOs operated under grant arrangements. The Basic IQC limits the US dollar amount US NGOs can receive as a "grant" under a task order. Therefore Offerors are expected to propose performance-based funding relationships (subcontracts) with the "lead agency" in each focus county to achieve results described in this solicitation." However, the subsequent paragraph states that "The Contractor is encouraged to consider use of performance incentives" and speaks of "any proposed pilot or roll-out of a PBF plan." Please provide specific guidance on expectations for the use of performance based contracts with Lead Agencies.

Answer: The expectations are that models of performance based contracting used elsewhere successfully in other countries funded by USAID should be proposed in order to ensure lead agencies are rewarded for achieving results. It is the expectation that the prospective bidder would propose HOW they will encourage lead agencies to perform in producing the required results. For example, an award fee structure could be proposed for exceeding results.

5. P. 20-21 Section A. IV. C: "Lead Agencies" and Local NGO/CBOs states that the successful Offeror "will be required to ensure that the current implementing lead agencies are included as subcontractors." Does this preclude the Offeror from open competition for subcontracts in the target counties?

Answer: No. See also Answer 3

6. If so, what mechanism does USAID recommend using to extend services?

Answer: Subcontracts are the only practical manner given the monetary restrictions of issuing grants under contract. Cooperative Agreements cannot be issued by a Contractor on behalf of USAID.

7. When is the next Southern Sudan Health Survey scheduled? Will it coincide with end of project dates?

Answer: The Sudan Household Survey was conducted in 2006 and released in 2007. It was done for the entire Sudan and the SSudan report issued separately. USAID is not aware when the GoSS plans to do a subsequent survey.

8. P. 25-26 The RFTOP speaks of "monitoring the nutritional status of children under seven". Is this the standard that should be used for all children in all counties? If so, it is not consistent with Food for Peace indicators that require monitoring the nutritional status of children under age 5. Yet the RFTOP notes the importance of complementarity with T. II MYAPs.

Answer: The correct standard is children under 5 (five).

9. What is USAID's position on providing Incentive payments to Home Health Promoters and VHCs?

Answer: Proposed costs must be reasonable, allocable and allowable. Any proposed costs should be directly related to project implementation and achieving results.

10. On page 19 it states: "the range of first year activities should be between \$9-10 million with years two and three receiving approximately equal treatment." This language could be interpreted a couple different ways. Please elaborate.

Answer: A TEC range for the task order was given as \$42-45 million for the 3 year period. The first year range is stated above. It is expected the available funding will substantially increase in the second year, and that third year funding will be at the same level as year two. All of these statements are subject to the availability of funds.

11. Are letters of commitment required for key personnel? Are bio data sheets required for key personnel?

Answer: Yes regarding letters of commitment. AIDAR 752.7001 applies for Bio Data sheets.

12. Are certifications and representations required? If so, which ones?

FAR 52.204-7 of the Basic IQC requires Offerors for this RFTOP solicitation to be registered in the Central Contractor Registration. Contractors are required to review and update on an annual basis from the date of initial registration or subsequent updates, its current information in the CCR database to ensure its information in the CCR data. An affirmation of Annual Certifications and Representations is attached and should be completed and returned as part of the Annex documents.

13. Is it acceptable for organizations within a consortium to also serve as a lead agency in a given focus county?

Answer: Yes. See question 3

14. Could USAID please proved more details regarding the estimated costs of co-locating with the Ministry of Health for budgeting purposes?

Answer: USAID recommends that prospective bidder consult with MOH and local contacts on cost saving approaches for imbedding staff, sharing infrastructure, improving systems in building capacity of MOH so that these can be sustained beyond the SHTP-2.

15. P. 42 Section VI, E. 4. states: "Under SHTP1, USAID funded rehabilitation of five Regional Training Centers (RTCs) for health workers in Hakim, Adol, Maridi, Yei, and Ganyiel." Can USAID provide more details on the scope of the technical assistance required for budgeting purposes?

Answer: Under SHTP 1 USAID has provided modest funding for rehabilitation and equipping of RTCs and development of manuals. It is likely that costs for additional equipment, teaching aides and reproduction of manuals should be considered for continuing to strengthen the RTCs, and disseminating technical materials at the training centers and in the SHTP 2 supported counties. Under the current cooperative agreement, USAID refurbished the Centers and improved classroom space, and provided furniture and equipment. This included desks, chairs, basic medical equipment, stethoscopes, microscopes, weighing scales, thermometers, and the like.

16. Can you explain how you calculated the minimum performance standards for each area of intervention to set targets for achievement over the life of the program?

Answer: Where data existed as of 2007, it was included and used as a basis for target setting in the out years. Please note that 2007 actuals are based on service statistics in 6 counties only.

17. To what extent did USAID consult with the lead agencies in setting these targets? After all, "The SHTP does not have a solid statistical base and reliable denominators to assess if and by how much access to and use of the seven high impact interventions have increased since its inception."

Answer: USAID utilized the service statistics and reports from the lead agencies as aggregated by SHTP 1. (SHTP Assessment Report p. ix) USAID acknowledges the difficulty in ensuring data quality and reliability in challenging environments like Southern Sudan. Therefore, as indicated in the Section IX Monitoring and Evaluation of the TASC3 SOW, bidders with experience in working in data challenged environments should provide expected program results with illustrative indicators, mid-term benchmarks, and end of project results. These will be further elaborated in the M&E plan which will be submitted to the USAID CTO within 60 days of the award. Target setting will be refined based on service statistics from current partners at the end of SHTP1. Future target setting will be done annually based on partner performance under SHTP2.

18. On page 57, concerning past performance references, please clarify what is meant by "Adjectival"? Will this be scored, and, if so, how many points will it receive?

Answer: Past Performance will not be numerically scored, however USAID will examine past performance references supplied by the offeror and may conduct additional independent research into a firm's past performance for contracts using the NIH Past Performance Information Retrieval System. This Government wide system assigns ratings in a range from "Outstanding" to "Poor". Work of an offeror performed under a Cooperative Agreement will be rated in a similar manner based on information from references provided by the Offeror or obtained by USAID. In an instance where two competing proposals were scored nearly equal on all other counts, Significant differences in Past Performance could be the decisive factor in selection for the award.

19. Section B.2 (5) on page 49 provides guidance on the contents of the corporate capabilities section and stipulates a 3 page limit. Section B.2 (7) on page 51 authorizes an attachment NTE 3 pages of "corporate capability statements." Please clarify how these differ Please also clarify how they relate to the scoring on corporate capabilities described in Section C on page 57?

Answer: They do not differ. To clarify, the Corporate Capability statement shall not exceed 3 pages and should be included as part of the annexes as revised in question 20. The scoring remains as defined in the RFTOP.

20. Please clarify if the 50 page limit includes (in addition to the technical approach) sections on personnel, corporate capability, and past performance – in other words, all four sections listed under Section C.I entitled "Technical Proposal" on pages 55-57? Section B (page 49) provides a suggested format for submitting the 50 page Technical Proposal.

Answer: The Proposal format with annexes is amended as follows:

Technical Proposal:

- Cover Page: One page
- Executive Summary: Two pages
- Technical Approach Not to exceed 50 pages excluding the above

Information and related page limits in addition to the Technical Proposal:

- Corporate Capability NTE 3 pages
- CVs of Key Personnel: NTE 5 positions and 3 pages per CV
- Staffing Plan: NTE 3 Pages
- Organizational Chart: NTE 2 Pages
- Offeror Past Performance References NTE 2 pages per reference, maximum of 5 references
- transition/ 60 day start-up plan and draft first year work plan and (in table format) (NTE 4 pages)
- 21. Please clarify how the M&E Plan/PMP described on page 44 should be presented, its page limit, and how it will be scored.

Answer: The M&E Plan/PMP is not requested as part of the technical proposal, but shall be developed by the successful bidder after award.

22. Please clarify if the 10 points for the proposed work plan and timeline (page 55) is based solely on the attachment described in section B.2 (7) as "draft first year work plan (in table format) (NTE 2 pages)"?

Answer: The Proposed Work plan for evaluation scoring purposes shall consist of the 60 day start up period activities and the draft first year work plan. NTE 4 pages as revised in question 20

23. Section B.2 (3) requests that the 50 page technical proposal "briefly describe ... managerial resources [and] how the overall program will be managed." Section B.2(7) authorizes an attachment with a "description of management systems and procedures required for successful administration (NTE 3 pages)." Please clarify whether a management section should be included in the 50 pages or as an attachment.

Answer: The management systems and procedures section should be included in the Technical Proposal. The limit of 3 pages is removed, but the Technical Proposal must not exceed 50 pages in length.

The reference to "a description of management systems and procedures required for successful administration (NTE 3 pages)." As an attachment is removed.

 Please also clarify how the management section will be scored and how many points it includes.

Answer: It will be scored as part of the technical proposal Section C, Evaluation Criteria, bullet number three which states: "The description of how the Scope of Work will be accomplished is clear, practical, and results-oriented, and it adequately addresses all of the technical requirements specified by USAID/Sudan in the SOW". This represents a bidder's description of how the program is to be managed.

25. Are there any special considerations/allowances for personnel working under this project in Juba and in Southern Sudan? Is this a non-dependant post?

Answer: See www.state.gov for special considerations or allowances. At the time of this solicitation, Juba is a non-dependent post for those under the USG Chief of Mission authority. Conditions in Juba are considered extremely difficult.

26. On page 7 in the background section, the RFTOP states that "no less than 80% of the population in the focus counties will utilize at least one of the high impact services". On page 22 under Child Health it says "USAID expects that more than 50% of children under the age of one who reside in the communities covered by the project service delivery points will be fully immunized, and no less than 60% of project focus counties will achieve greater than 80% of DPT3." In other instances, targets alternatively focus on the county populations and on the communities serviced by the SDP. Please clarify whether counties and populations serviced by project SDPs are being used interchangeably, and if so, which is the intended catchment area?

Answer: The intended catchment is defined by the reach of each of the facilities since it would be impracticable for a small network of primary health care centers and health care units to services the entire county.

27. Are the target groups for different elements of the health services county populations or SDP area populations?

Answer: The target groups are those within the catchment of the SDP.

28. Will the project support purchase and distribution of rapid diagnostic tests as well as the development of microscopy based services at facilities with lab capacity?

Answer: Yes, the project can support modest purchases and distribution of diagnostic supplies required for delivery of "high impact services which are directly linked to results and subject to USAID regulations for procuring rapid diagnostic test kits.

29. In regard to indicators and targets for child spacing and family planning (pages 34, 36), the RFTOP says that contractors shall provide targets within 60 days due to absence of data. In the standard indicator tables, there are other indicator sets of data for which there is No Data. In these cases, does the 60 day provision also apply? Or more generally, does the contractor have the 60 days to provide targets in all cases where no targets are indicated?

Answer: As per the M&E Plan Section IX, the Contractor has up to 60 days to provide the M&E plan which include all proposed targets across against all Program Elements. Following consultations with USAID on targets, final approval will be provided.

30. In regard performance targets for basic service, in most cases the targets stated in the summary statement and in the minimum performance targets are the same. However, in several instances there is a difference in targets indicated in the summary statement of the service delivery sections and the minimum and the minimum performance standards. For example in Water and Sanitation, the summary goal states 500,000 people, and in the minimum standards, 250,000 people.

Answer: The Water and Sanitation performance target should be corrected to read 250,000.

31. In MCH section, the summary goal states 20% for assisted deliveries the as the proportion of pregnant women delivery in health facilities, and in the minimum performance standards, 15%. Which target applies in the case of the project?

Answer: The MCH minimum performance standard should be 15%.

32. In regard to performance based contracting mechanism to be used in the project, does the minimum performance standard targets equate with the 100% performance achievement?

Answer: Yes.

33. If these are the targets for 100% achievement, does this represent the performance target to be met in all SDP counties, or does this represent the average to be achieved as a result of cumulative performance in all counties in the project?

Answer: The performance target represents the average to be achieved as a result of cumulative performance in all counties in the project given differences in service delivery across all IDPs.

34. On page 50 of the RFTOP under "Authorized Attachments", the page limit for "Organizational charts with Position Descriptions" is NTE 2 pages. It is uncertain if the page limit of 2 pages is for each Position Description or for the total of all Position Descriptions. Please clarify.

Answer: See revisions provided in question 20.

35. On page 9 of the RFTOP under "Major Annexes", the documents referred to under letters D, H, J, K, L, M, and N1-4 are not found at the http://ghiqc.usaid.gov/tasc3/index.html website, nor were they provided as attachments to USAID's email to TASC3 IQC holders. Are recipients responsible for obtaining these documents separately? Please clarify.

Answer: Please see the reposted MAJOR Annexes and SUPPLEMENTAL Annexes on TASC3 website.

36. On page 41 under "Human Resource Capacity", the RFTOP refers to collaboration between MDTF and SHTP2. Can USAID elaborate on how they envision the Lead NGOs in each State (through MDTF) and the Contractor for SHTP2 working together - specifically with respect to reporting and oversight of PHCC/Us?

Answer: MDTF is just starting up with its lead agencies to support the state MOHs in strengthening their capacity in overseeing all health services in the state. So far, five states have been identified under the MDTF. They include Upper Nile, Jonglei, Lakes, Eastern Equitoria, and Warrup. USAID envisions that bidders will commit to identifying ways it can work in collaboration with MDTF as the focus of their work is at the state level

and SHTP2 will work with county health departments and communities to extend services in the SDPs. It is envisioned the SHTP2 Contractor will ensure that capacity building tools and materials will be shared with SMOHs, information will be shared and copies of reports providing quarterly progress on service delivery performance will be provided to SMOHs.

37. Can USAID provide a telephone number for Mr. Johnson? International courier companies delivering Offerors' proposals will require this number.

Answer: Marcus Johnson Nairobi, Kenya 254-20-862-2000

38. In Figure 1, the following counties and towns have footnotes indicating that programming either has not begun or is still in the start-up phase: Malakal, Juba, Wau, Kapoete. Can USAID please elaborate further on the status of these grants? Have grant agreements been negotiated and signed with INGOs for these towns and counties?

Answer: These final grants will include Malakal (IMC); Juba (IMC in process), Save the Children (Kapoeta) and Wau (JSI direct implementation).

39. We assume that Lead NGOs (subcontractor recipients) cannot participate on the Project team, as this may present a conflict of interest. Is this correct?

Answer:. The current cooperative agreement is scheduled to wind down in conjunction with the start up of the task order, and there will be some overlap. Bidders should ensure there is no conflict of interest and adhere to USAID procurement regulations.

40. USAID has identified the Lead NGOs from the SHTP Project, and has indicated a desire to continue work with them. May/should bidders also pre-identify potential subcontractor recipients?

Answer: For subcontractors, yes. The term "recipient" in USAID terminology refers to grants and cooperative agreements. We believe we outlined in the RFTOP that there will be a grants under contract mechanism as part of an Offerors proposal. It is not necessary to identify potential recipients for grants under contracts program at this time.

41. In Section A. VI. C (page 20), the RFTOP states that the successful offeror will ensure that the current implementing lead agencies are included as subcontractors. The same section states that an estimated 75% of total funding is to be allocated to subcontracts. Can USAID provide the overall percentage of subcontracting funds that should be allocated to current implementing agencies and the percentage that should be allocated to new partners and initiatives?

Answer: Unless GoSS determines services are no longer required by those agencies because populations have relocated or other donor funding is available, an estimated minimum of 75% of the budget should be allocated to sustaining the current 145 SDPs. USAID welcomes bidders to identify new partners for expanding service delivery provided this is done at a minimum of 75% of the proposed budget for service delivery subcontracts.

42. Under Maternal Health, VI. D. 5. (p 33), can USAID provide additional details to clarify the difference between points c). "safe delivery or basic emergency maternal and new born care", and d) "maternal and newborn complications".

Answer to be supplied.

43. Please confirm that items such as a table of contents, acronym list, transmittal letter and letters of commitment (from proposed subcontractors and key personnel) will be excluded from the page limits given for the technical proposal.

Answer: Each of the questioned items will not count against the page limit of the technical proposal.

44. Please indicate whether, in addition to its own Corporate Capability Statement, the Offeror may submit one 3-page Corporate Capability statement for each proposed subcontractor.

Answer: The Contractor is responsible for successful performance under the task order. USAID has no direct relationship with subcontractors. Corporate capability statements from subcontractors will not be evaluated.

45. The RFTOP requests up to 5 CPR Reports. Does this mean 5 CPR reports for the entire submission, or can the Offeror submit 5 for itself and a total of 5 additional reports for subcontractors?

Answer: The requirement for Offerors to submit actual CPR reports is hereby removed.

The information to be provided is as stated in B.2.5 d) with a maximum of 5 references and a 2 page limit for each reference.

The Contractor is responsible for successful performance under the task order. USAID has no direct relationship with subcontractors. Past performance is only requested from the Offeror.

46. RFTOP part B.2.6 refers to Past Performance information to be included in the proposal. Is this RFTOP section referring to the Past Performance Reports mentioned in part B.2.7 (to be included as a 5-page attachment

There is no reference in B. 2.6 to "including" the categories 6 a)- e) in the proposal. It states "how" past performance will be evaluated and what areas will be examined.

47. Finding suitable housing is a critical concern for local staff hires when considering employment options. Can USAID please comment on the current housing arrangements for local hires? Is housing provided onsite at the project compound or does the project provide local staff with housing/transportation allowances?

Answer: Housing is difficult to find and costly in Sudan for local hires and expatriate staff. There is limited housing on the current SHTP 1 compound. However as housing options expand in Juba, bidders should commit to standardizing compensation packages including housing and transport in line with changing local conditions and practices.

48. We understand that the cost proposal needs to be submitted in the summary format presented on page 52. Is there a specified format for additional breakdown information?

Answer: There is no preferred format but budgets should be broken down by year and provide enough details for USAID to perform effective cost realism analysis. Also include budget notes to justify proposed costs.

49. For budgeting purpose, what exchange rate should Offerors use in preparing the cost proposal?

Answer: US\$ 1 = 2.05 Sudanese Pounds

50. Could USAID please provide copy of the current Local Compensation Plan?

Answer: The LCP is supplied as an attachment to the questions.